

H5779 Meridian Health Plan of Illinois Inc.
Dual Eligible (Dual Eligible Subset - Medicare Zero Cost-sharing) Special Needs Plan

Model of Care Score: 91.67%

3-Year Approval

January 1, 2015 to December 31, 2017

Target Population

Meridian Health Plan of Illinois (Meridian) is a Medicare zero-cost-sharing, dual eligible Special Needs Plan (D-SNP) for individuals whose income is no more than 80 percent of the federal poverty level and those individuals whose income is between 80 and 100 percent of the federal poverty level. Meridian is a Medicare Advantage plan for individuals who are entitled to Medicare Part A and/or Part B and receive some form of Medicaid benefit.

An analysis of Meridian's dual eligible population reveals: 60 percent of the members are female and the average age is 55 years old. Eighty four percent of members are White (Non-Hispanic), 11 percent are Black (Non-Hispanic), 2 percent are Arab American and 1 percent are Latino/Hispanic. The majority of Meridian members speak English.

The top member-reported medical and chronic conditions are diabetes, behavioral/mental health conditions and hypertension. The top member-reported behavioral health conditions are depression, anxiety disorder and bipolar disorder. About 6 percent of members report that their overall health is excellent, and 36 percent report fair. Based on claims data, 92 percent of members have between one and two chronic conditions, and 7 percent have three to five chronic conditions.

Provider Network

Meridian's provider network includes, but is not limited, to the following: primary care providers (PCP), nurse practitioners (NP), internal medicine, family practitioners, physician assistants (PA), doctor of osteopathic medicine (DO), doctor of medicine (MD); consultative and surgical specialists; mental health specialists, specialized mental health agencies with comprehensive programs, psychiatrists, psychiatric and mental health Nurse Practitioners (NP), licensed clinical social workers (LCSW), psychologists; ancillary providers, physical therapists, occupational therapists, speech therapists, nutrition, durable medical equipment (DME); disease specialists; hospitals; long term acute care facilities; inpatient rehabilitation; skilled nursing facilities (SNF); home health agencies (HHA); hospice; dialysis and transplant facilities; gerontologists; in home primary care services; pharmacies and mail order pharmacy; psychiatric hospital and mental health services provided in home and in facilities.

Care Management and Coordination

A health risk assessment (HRA) is conducted by a care coordinator (CC) within the first 90 days of member enrollment. Upon completion of the HRA, the CC and the member complete additional assessments, and if needed, discuss the results of the HRA including the meaning of stratification and the members' stratification level. The CC uses this information to develop an individualized care plan (ICP). Goals and interventions are agreed upon by the member and CC.

Each members' ICP is shared with the interdisciplinary care team (ICT) who reviews the member's medical history summary, results of the HRA, the initial ICP and goals. The ICP is updated to reflect ICT input and shared with the member by telephone. The CC provides the member and the member's PCP with a written copy of the HRA as well as the initial and updated ICP.

Along with the HRA, a medication log is completed. The HRA and the medication log are used as a personal health record. This personal health record becomes the foundation of the member-centric ICP. The HRA forms the baseline data which is compared to the results of future annual reassessments which evaluate progress or changes in health and functional status.

The PCP serves as the member's medical home and interacts with the member's ICT. They are responsible for working collaboratively with the member, ICT and Meridian CC staff to ensure timely access to quality care.

This MOC summary is intended to provide a broad overview of the SNP's MOC. Although the full extent of any MOC cannot be conveyed in a short summary, this summary provides the reader with a general overview of how the SNP addresses beneficiary needs.

For more information about this health plan refer to the Special Needs Plan's website at: <http://www.mhplan.com/>.